Department of Labor and Industries PO Box 44632 Olympia WA 98504-4632



REQUEST FOR PUBLIC RECORDS RCW 42.17

Date						
Name of person making request Phone number			ber	Name of person to whom information is to be sent:		
Address				Address		
City	Sta	te Z	IP	City	State ZIP	
	fication nur	nber and/or			entify the records you wish to inspect by referring to s are needed, please indicate which file(s) you'd lik	
that are requested for con	mmercial p	ourposes.	The Departme	ent of La	Labor and Industries from releasing lists of individual abor and Industries defines commercial purpose a facilitating profit-expecting activity.	
I have read the statement ab any type is included in the n				sted record	ds for commercial puropses in the event that a list of	
Date signed (mm,dd,yy)	County			State	Signature X	
For Department use only:						
Action taken on request						
Data nation talean	Saction /= C	žao			Name of person taking the estion	
Date action taken	Section/off	ice			Name of person taking the action	